

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Schiller, Knapp, Lefkowitz, & Hertz, LLP

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names
FDBA Schiller & Knapp, LLP

3. Debtor's federal Employer Identification Number (EIN) 14-1809981

4. Debtor's address
Principal place of business
15 Cornell Road
Latham, NY 12110
Number, Street, City, State & ZIP Code
Albany
County
Mailing address, if different from principal place of business
P.O. Box, Number, Street, City, State & ZIP Code
Location of principal assets, if different from principal place of business
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) http://www.schillerknapp.com/

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (if known)

7. Describe debtor's business A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

5411**8. Under which chapter of the Bankruptcy Code is the debtor filing?***Check one:*

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District _____
District _____When _____
When _____Case number _____
Case number _____

Debtor **Schiller, Knapp, Lefkowitz, & Hertzell, LLP** Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district? Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? ☒ No ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds Check one:
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input checked="" type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|--|--|

Debtor

Schiller, Knapp, Lefkowitz, & Hertz, LLP

Case number (if known)

Name

☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP** Case number (if known) _____
Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 30, 2023**
MM / DD / YYYY

X /s/ Gary Lefkowitz
Signature of authorized representative of debtor

Title **Partner**

Gary Lefkowitz
Printed name

18. Signature of attorney **X /s/ Michael Boyle**
Signature of attorney for debtor

Date **May 30, 2023**
MM / DD / YYYY

Michael Boyle
Printed name

Boyle Legal LLC
Firm name

**64 2nd Street
Troy, NY 12180**
Number, Street, City, State & ZIP Code

Contact phone **518-687-1648** Email address **mike@boylebankruptcy.com**

519211 NY
Bar number and State

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 30, 2023**

X /s/ Gary Lefkowitz

Signature of individual signing on behalf of debtor

Gary Lefkowitz

Printed name

Partner

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
 United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**
 Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
a360 Technology Solutions LLC P.O. Box 679278 Dallas, TX 75267		Vendor				\$102,976.47
Accu-Serve, Ltd 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797		Vendor				\$44,023.94
Advantage Foreclosure Services, Inc. 201 Old Country Road - Suite 200 Melville, NY 11747		Vendor				\$132,730.06
Advantage Legal Services, Inc 201 Old Country Road Melville, NY 11747		Vendor				\$103,257.08
Alstate Process Service, Inc. 60 Burt Drive Deer Park, NY 11729		Vendor				\$346,554.25
DGR Subpoena & Messenger Svc, Inc. 1359 Littleton Rd Morris Plains, NJ 07950-3000		Vendor				\$34,396.41
Fortune Title Agency, Inc. 39 Woodland Road Roseland, NJ 07068		Vendor				\$36,113.50

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Frontier Abstract & Researchers, Inc. 69 Cascade Drive - Suite 101 Rochester, NY 14614		Vendor				\$101,967.96
Hewlett-Packard Financial Services Co 200 Connell Drive - Suite 5000 Berkeley Heights, NJ 07922		Servers (leased)		\$115,293.89	\$0.00	\$115,293.89
IPFS 170 Northpointe Parkway - Suite 300 Buffalo, NY 14228		E&O Insurance				\$75,475.10
M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203		Credit Card	Disputed			\$75,000.00
M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203		Blanket UCC Lien	Disputed	\$126,000.00	\$0.00	\$126,000.00
M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203		Blanket UCC lien	Disputed	\$1,006,000.00	\$0.00	\$1,006,000.00
PNJ Technology Partners, Inc 426 New Karner Road Albany, NY 12205		Vendor				\$50,896.72
ProVest LLC 7702 Woodland Center Blvd - Suite 100 Tampa, FL 33614		Vendor				\$78,470.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Publication Elite Company, Inc 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797		Vendor				\$129,459.84
Small Business Administration Office of General Counsel 409 Third St., SW Washington, DC 20416				\$148,944.63	\$0.00	\$148,944.63
STOX Posting & Publishing LLC 2701 Transit Road - Suite 139 Elma, NY 14059		Vendor				\$140,213.54
STOX Pro Serve 2701 Transit Road - Suite 140 Elma, NY 14059		Vendor				\$50,047.54
The Data Center 426 New Karner Road Albany, NY 12205		Vendor				\$85,463.05

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertz, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>473,500.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>473,500.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>1,401,320.37</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>72,991.60</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>1,929,538.94</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>3,403,850.91</u>

Fill in this information to identify the case:Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B
Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	KeyBank	Checking	0240	\$0.00
3.2.	KeyBank	Checking	1149	\$0.00
3.3.	KeyBank - NY trust account. Debtor has no monetary interest	IOLA	3870	\$0.00
3.4.	KeyBank - PA trust account. Debtor has no monetary interest	IOLA	1016	\$0.00
3.5.	KeyBank - VT trust account. Debtor has no monetary interest.	IOLA	1184	\$0.00
3.6.	KeyBank	Checking	2053	\$0.00

Checking

0240

\$0.00

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.2.	KeyBank	Checking	1149	\$0.00
3.3.	KeyBank - NY trust account. Debtor has no monetary interest	IOLA	3870	\$0.00
3.4.	KeyBank - PA trust account. Debtor has no monetary interest	IOLA	1016	\$0.00
3.5.	KeyBank - VT trust account. Debtor has no monetary interest.	IOLA	1184	\$0.00
3.6.	KeyBank	Checking	2053	\$0.00

Checking

1149

\$0.00

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.3.	KeyBank - NY trust account. Debtor has no monetary interest	IOLA	3870	\$0.00
3.4.	KeyBank - PA trust account. Debtor has no monetary interest	IOLA	1016	\$0.00
3.5.	KeyBank - VT trust account. Debtor has no monetary interest.	IOLA	1184	\$0.00
3.6.	KeyBank	Checking	2053	\$0.00

IOLA

3870

\$0.00

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.4.	KeyBank - PA trust account. Debtor has no monetary interest	IOLA	1016	\$0.00
3.5.	KeyBank - VT trust account. Debtor has no monetary interest.	IOLA	1184	\$0.00
3.6.	KeyBank	Checking	2053	\$0.00

IOLA

1016

\$0.00

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.5.	KeyBank - VT trust account. Debtor has no monetary interest.	IOLA	1184	\$0.00
3.6.	KeyBank	Checking	2053	\$0.00

IOLA

1184

\$0.00

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.6.	KeyBank	Checking	2053	\$0.00

Checking

2053

\$0.00

Debtor Schiller, Knapp, Lefkowitz, & Hertz, LLP Case number (If known) _____
Name

3.7.	<u>KeyBank</u>	<u>Checking</u>	<u>4522</u>	<u>\$0.00</u>
3.8.	<u>KeyBank</u>	<u>Checking</u>	<u>1024</u>	<u>\$0.00</u>
3.9.	<u>KeyBank</u>	<u>Checking</u>	<u>0864</u>	<u>\$0.00</u>
3.10.	<u>KeyBank</u>	<u>Money Market</u>	<u>9223</u>	<u>\$0.00</u>
3.11.	<u>KeyBank</u>	<u>Checking</u>	<u>8320</u>	<u>\$0.00</u>
3.12.	<u>M&T - REO account.</u>	<u>Checking</u>	<u>5388</u>	<u>\$0.00</u>
3.13.	<u>M&T</u>	<u>Checking</u>	<u>5469</u>	<u>\$0.00</u>
3.14.	<u>M&T. NJ trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>0661</u>	<u>\$0.00</u>
3.15.	<u>M&T. NJ trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>5025</u>	<u>\$0.00</u>
3.16.	<u>M&T</u>	<u>Checking</u>	<u>0646</u>	<u>\$0.00</u>
3.17.	<u>M&T</u>	<u>Savings</u>	<u>8582</u>	<u>\$0.00</u>
3.18.	<u>M&T</u>	<u>Checking</u>	<u>5592</u>	<u>\$0.00</u>
3.19.	<u>Saratoga Bank. NY trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>1433</u>	<u>\$0.00</u>

4. **Other cash equivalents (Identify all)**

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (If known)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 327,500.00 - 0.00 = \$327,500.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 96,000.00 - 0.00 = \$96,000.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$423,500.00

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

Debtor Schiller, Knapp, Lefkowitz, & Hertz, LLP Case number (If known) _____
Name

39. **Office furniture**
Office furniture and fixtures. \$1,600,000.00 **Liquidation** \$50,000.00

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**
Servers (leased) \$0.00 \$0.00

Copiers (leased) \$0.00 \$0.00

42. **Collectibles** *Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*

43. **Total of Part 7.** \$50,000.00
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (If known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$423,500.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$50,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$473,500.00	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$473,500.00

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Hewlett-Packard Financial Services Co <small>Creditor's Name</small> 200 Connell Drive - Suite 5000 Berkeley Heights, NJ 07922 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 7909 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Servers (leased) Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$115,293.89	\$0.00

2.2	M&T Bank -Special Assets Department <small>Creditor's Name</small> Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 0026	Describe debtor's property that is subject to a lien Blanket UCC lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	\$1,006,000.00	\$0.00
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

2.3 **M&T Bank -Special Assets Department**

Creditor's Name

**Mr. Kenneth Paulin, Jr.
One Fountain Plaza - 9th
Floor
Buffalo, NY 14203**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number
0042

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$126,000.00

\$0.00

Blanket UCC Lien

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

2.4 **National Business Leasing**

Creditor's Name

**A Program of DeLage
Landen Financial Svc
1111 Old Eagle School
Road
Wayne, PA 19087**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number
3920

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$5,081.85

\$0.00

Copiers (leased)

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.5 **Small Business Administration**

Describe debtor's property that is subject to a lien

\$148,944.63

\$0.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Creditor's Name

**Office of General Counsel
409 Third St., SW
Washington, DC 20416**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

UNKN

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

UCC Blanket Lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$1,401,320.3
7

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

**Greg Mascitti, Esq.
McCarter & English, LLP
825 Eighth Ave, 31st Floor
New York, NY 10019**

On which line in Part 1 did you enter the related creditor?

Line **2.2**

Last 4 digits of account number for this entity

**National Business Leasing
PO Box 41602
Philadelphia, PA 19101-1602**

Line **2.4**

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertzelt, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address A. Christine Sano 5 Hidley Ave. Wynantskill, NY 12198	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$489.33	\$489.33
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Amanie Akarah-Bailey 42 Troy View Lane Buffalo, NY 14221	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,538.47	\$1,538.47
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP	Case number (if known)	
	Name		

2.3	Priority creditor's name and mailing address Amy DeAngelus 598 Dell Road Landing, NJ 07850	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,779.00	\$2,779.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Ashley Novak 1325 Blue Factory Hill Road Cropseyville, NY 12052	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$779.65	\$779.65
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Barbara Worek 6914 Keystone Street Philadelphia, PA 19135	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,120.46	\$1,120.46
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Brandon Johnson 1245 Ridge Avenue - Unit 108 Philadelphia, PA 19123	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,004.51	\$1,004.51
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known)
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2.7	Priority creditor's name and mailing address Breean VanSolkema 5358 Main Street Waitsfield, VT 05673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$53.55	\$53.55
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.8	Priority creditor's name and mailing address Brittney Wilkinson 11277 Southwest Lyra Drive Port Saint Lucie, FL 34987	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$731.25	\$731.25
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.9	Priority creditor's name and mailing address Carolyn Matthei 901 Park Avenue - Apt 5 Albany, NY 12208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$856.40	\$856.40
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.10	Priority creditor's name and mailing address Connie Spross 4823 Comly Street Philadelphia, PA 19135	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,290.09	\$1,290.09
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known)
2.11	Priority creditor's name and mailing address Daniel Young, Esq. 38 Nelson Farm Road Moretown, VT 05660	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$16,364.00 \$15,150.00
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.12	Priority creditor's name and mailing address Elliot Smeltzer 61 Johnson Rd. Latham, NY 12110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$1,200.00 \$1,200.00
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.13	Priority creditor's name and mailing address Erin Mesmer 2746 Love Road Grand Island, NY 14072	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$836.31 \$836.31
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.14	Priority creditor's name and mailing address Gary Lefkowitz, Esq. 25 Linden Ct, Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$18,862.85 \$15,150.00
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known)
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2.15	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
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Date or dates debt was incurred Last 4 digits of account number n/a Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.16	Priority creditor's name and mailing address Jennifer Sprety 15 Bluebird Ct. Waterford, NY 12188	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,387.71	\$1,387.71
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.17	Priority creditor's name and mailing address Jennifer Yetman 4028A Door Stone Drive Latham, NY 12110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$850.50	\$850.50
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.18	Priority creditor's name and mailing address Kassandra Pangallo 123 1st Ave Mechanicville, NY 12118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$718.29	\$718.29
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known)
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2.19	Priority creditor's name and mailing address Katherine Sticer 15825 State Route 22 Stephentown, NY 12168	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$931.87	\$931.87
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.20	Priority creditor's name and mailing address Kathryn Legg 89 South Allen Street Albany, NY 12208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$628.89	\$628.89
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.21	Priority creditor's name and mailing address Kathy McCullough Day 21 David Avenue Troy, NY 12180	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,682.69	\$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.22	Priority creditor's name and mailing address Katie Graff 209 Bates Rd. Medina, NY 14103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,250.00	\$1,250.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP		Case number (if known)	
	Name			

2.23	Priority creditor's name and mailing address Kelly Borello 8100 W. Highway 98 - Apt 410 Pensacola, FL 32506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$877.80	\$877.80
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Laura Guzor 22 Hoffman Drive Latham, NY 12110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,234.02	\$1,234.02
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address Lauren Farrelly 5 Lindberg Drive Latham, NY 12110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$819.00	\$819.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Leonard DePasquale 1150 Millington Road Schenectady, NY 12309	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$738.08	\$738.08
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Schiller, Knapp, Lefkowitz, & Hertzelt, LLP Name	Case number (if known)
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2.27	Priority creditor's name and mailing address Linda Overby 79 Bridgewood Lane Watervliet, NY 12189	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,268.61	\$1,268.61
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.28	Priority creditor's name and mailing address Lisa Gadomski 58 Whitney Road South Saratoga Springs, NY 12866	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,562.48	\$1,562.48
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.29	Priority creditor's name and mailing address Nancy Green Montiel 81 English Road Round Lake, NY 12151	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$208.50	\$208.50
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.30	Priority creditor's name and mailing address New York State Dept. of Tax and Finance Bankruptcy Section PO BOX 5300 Albany, NY 12205-0300	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
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Date or dates debt was incurred Last 4 digits of account number n/a Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP		Case number (if known)	
	Name			

2.31	Priority creditor's name and mailing address Pamela Agard 30 Park Place Saratoga Springs, NY 12866	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$911.61	\$911.61
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.32	Priority creditor's name and mailing address Patricia Ouellette 6 Merrall Drive Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,384.62	\$1,384.62
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.33	Priority creditor's name and mailing address Richard Gerbino 50 Mulberry Lane Colts Neck, NJ 07722	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,206.77	\$3,206.77
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.34	Priority creditor's name and mailing address Samantha Batcher 2020 Westside Ave Schenectady, NY 12306	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$712.69	\$712.69
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP		Case number (if known)	
	Name			

2.35	Priority creditor's name and mailing address Shannon DeFilippo-Cleland 339 Saratoga Rd. Schenectady, NY 12302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$986.85	\$986.85
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.36	Priority creditor's name and mailing address Shelby Mantica 142 Western Ave Cohoes, NY 12047	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,334.33	\$1,334.33
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.37	Priority creditor's name and mailing address Sheree Stewart 1506 Huntridge Drive Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$726.53	\$726.53
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.38	Priority creditor's name and mailing address Thomas Pesano 810 Vermont View Dr. Watervliet, NY 12189	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$738.16	\$738.16
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP	Case number (if known)
	Name	

2.39	Priority creditor's name and mailing address Valerie Cesare 4 Kyle Drive Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$925.73	\$925.73
		Basis for the claim:		
Date or dates debt was incurred				
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim	
3.1	Nonpriority creditor's name and mailing address 1 Oak Advisory 2901 West Coast Hwy Newport Beach, CA 92663 Date(s) debt was incurred _ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.2	Nonpriority creditor's name and mailing address 21st Mortgage Corporation 1 Market Street, Suite 100 Knoxville, TN 37902 Date(s) debt was incurred _ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.3	Nonpriority creditor's name and mailing address 360 Legal, Inc. 201 Fletcher Avenue - Suite 100 Sarasota, FL 34237 Date(s) debt was incurred _ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,278.00	
3.4	Nonpriority creditor's name and mailing address 3N Document Destruction, Inc. P.O. Box 4044 Clifton Park, NY 12065 Date(s) debt was incurred _ Last 4 digits of account number <u>278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.5	Nonpriority creditor's name and mailing address 4908 Associates, LLC 120 North Main Street New City, NY 10956 Date(s) debt was incurred _ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.6	Nonpriority creditor's name and mailing address A.W. Hamel Stair Mfg., Inc. 3111 Amsterdam Road Schenectady, NY 12302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address a360 Technology Solutions LLC P.O. Box 679278 Dallas, TX 75267 Date(s) debt was incurred _____ Last 4 digits of account number <u>SCHILLER&K</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$102,976.47 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address AbacusNext HQ P.O. Box 31001-4038 Pasadena, CA 91110-4038 Date(s) debt was incurred _____ Last 4 digits of account number <u>9507</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,652.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address ABC Car Leasing, Inc. 950 New Loudon Road Latham, NY 12110 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address ABNB Federal Credit Union 830 Greenbrier Circle Chesapeake, VA 23320 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address Accu-Serve, Ltd 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$44,023.94 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address Addison County Sheriff 35 Court Street Middlebury, VT 05753 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.13	Nonpriority creditor's name and mailing address ADP LLC P.O. Box 842875 Boston, MA 02284-2875 Date(s) debt was incurred _____ Last 4 digits of account number <u>2121</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor - Payroll Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address Advantage Foreclosure Services, Inc. 201 Old Country Road - Suite 200 Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$132,730.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address Advantage Legal Services, Inc 201 Old Country Road Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$103,257.08 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address Affinity Consulting Group 8200 Bryan Dairy Road - Suite 160 Seminole, FL 33777 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,446.88 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.17	Nonpriority creditor's name and mailing address AGCO Finance LLC PO BOX 2000 Des Moines, IA 50320 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.18	Nonpriority creditor's name and mailing address AIS InfoSource LP LP 5847 San Felipe Suite 1200 Houston, TX 77057 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.19	Nonpriority creditor's name and mailing address AIS Portfolio Services, LP LP 5847 San Felipe, Suite 1200 Houston, TX 77057 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.20	Nonpriority creditor's name and mailing address Albany Management, Inc. 4 Computer Drive West Albany, NY 12205 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.21	Nonpriority creditor's name and mailing address Aldridge Pite, LLP 3575 Piedmont Center, Suite 500 Atlanta, GA 30305 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.22	Nonpriority creditor's name and mailing address ALFN c/o Schmehsahl Treloar & Co, PC Attn: Mark O'Donnell 10805 Sunset Office Drive - Suite 400 Saint Louis, MO 63127 Date(s) debt was incurred ____ Last 4 digits of account number <u>4114</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,250.00
3.23	Nonpriority creditor's name and mailing address Ally Bank serviced by Ally Servicing LLC PO Box 130424 Saint Paul, MN 55113 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.24	Nonpriority creditor's name and mailing address Alstate Process Service, Inc. 60 Burt Drive Deer Park, NY 11729 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$346,554.25
3.25	Nonpriority creditor's name and mailing address AltaTech Asset Management 139 Fulton Street, Suite 614 New York, NY 10038 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.26	Nonpriority creditor's name and mailing address American Airlines Credit Union PO Box 619001, MD2100 DFW Airport Dallas, TX 75261 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.27	Nonpriority creditor's name and mailing address American Bank 4029 W. Tighman Street Allentown, PA 18104 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	Nonpriority creditor's name and mailing address American Battlefield Trust 1156 15th Street, N.W. Suite 900 Washington, DC 20005 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	Nonpriority creditor's name and mailing address American Credit Acceptance LLC 961 E Main St, Spartanburg, SC 29302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	Nonpriority creditor's name and mailing address American Honda Finance Corporation 3625 West Royal Lane, Suite 200 Irving, TX 75063 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	Nonpriority creditor's name and mailing address American Loan Servicing 1192 E Draper Pkwy Draper, UT 84020 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	Nonpriority creditor's name and mailing address American Mortgage Investment Properties; PO BOX 2741 Seal Beach, CA 90740 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	Nonpriority creditor's name and mailing address AmericanChecked Inc. Dept 0208 P.O. Box 120208 Dallas, TX 75312-0208 Date(s) debt was incurred _____ Last 4 digits of account number <u>8722</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,521.85 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.34	Nonpriority creditor's name and mailing address AmeriCredit Financial Services PO Box 18353 Arlington, TX 76096 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.35	Nonpriority creditor's name and mailing address AMOS Financial LLC 3330 Skokie Valley Road - Suite 301 Highland Park, IL 60035 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.36	Nonpriority creditor's name and mailing address Animal Clinic of Hampton Bays 238 W. Montauk Hwy Hampton Bays, NY 11946 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.37	Nonpriority creditor's name and mailing address Anthony Signorelli PO BOX 320 Schroon Lake, NY 12870 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.38	Nonpriority creditor's name and mailing address Arvest Central Mortgage Company 801 John Barrow Road, Suite 1 Little Rock, AR 72205 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.39	Nonpriority creditor's name and mailing address Ascendus 80 Maiden Lane New York, NY 10038 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.40	Nonpriority creditor's name and mailing address Asset Research Group 6011 Knotty Wood Dr Houston, TX 77092 Date(s) debt was incurred ____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.41	Nonpriority creditor's name and mailing address Auction.com, LLC 1 Mauchly Irvine, CA 92618 Date(s) debt was incurred ____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,533.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.42	Nonpriority creditor's name and mailing address Avidia Bank 42 Main Street Hudson, MA 01749 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.43	Nonpriority creditor's name and mailing address B/A Properties, LLC 19 British American Blvd. Latham, NY 12110 Date(s) debt was incurred ____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,947.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Latham, NY - Commercial Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	Nonpriority creditor's name and mailing address Baldwin Sutphen & Frateschi, PLLC 126 North Salina Street - Suite 400 Syracuse, NY 13202-1050 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	Nonpriority creditor's name and mailing address Bank of America, NA PO BOX 2759 Jacksonville, FL 32203 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.46	Nonpriority creditor's name and mailing address Bank of Bennington 155 North Street Bennington, VT 05201 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.47	Nonpriority creditor's name and mailing address Barrett, Daffin, Frappier, Levine & Bloc 780 Johnson Ferry Road, Suite 240 Atlanta, GA 30342 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.48	Nonpriority creditor's name and mailing address Bayview Financial 4425 Ponce De Leon Blvd, 5th Floor Miami, FL 33146 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.49	Nonpriority creditor's name and mailing address Bell Point Shores Homeowners Association PO BOX 712 Bolton Landing, NY 12814 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.50	Nonpriority creditor's name and mailing address Beltway Capital Management, LLC Executive Plaza II Hunt Valley, MD 21031 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.51	Nonpriority creditor's name and mailing address Bennington County Habitat for Humanity P.O. Box 1159 Manchester, VT 05254 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.52	Nonpriority creditor's name and mailing address Black Knight Servicing Tech. - BK/FC P.O. Box 849277 Los Angeles, CA 90084-9277 Date(s) debt was incurred _____ Last 4 digits of account number <u>at-sckn</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,821.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.53	Nonpriority creditor's name and mailing address Black Knight Servicing Technologies, LLC P.O. Box 809007 Chicago, IL 60680-9007 Date(s) debt was incurred _____ Last 4 digits of account number <u>D82</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,070.44 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.54	Nonpriority creditor's name and mailing address Black Knight Svcng Technologies, LLC In ATTN: Accounting Department P.O. Box 842651 Los Angeles, CA 90084-2651 Date(s) debt was incurred _____ Last 4 digits of account number <u>SCHILLER</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,944.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.55	Nonpriority creditor's name and mailing address Blue Bridge Financial, LLC 535 Washington Street Buffalo, NY 14203 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.56	Nonpriority creditor's name and mailing address Brian Rayment 7666 E. 61st Street, Ste. 550 Tulsa, OK 74133 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.57	Nonpriority creditor's name and mailing address Brown & Connery 360 Haddon Ave. Collingswood, NJ 08108 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.58	Nonpriority creditor's name and mailing address BSI Financial Services 7500 Old Georgetown Road, Suite 1350 Bethesda, MD 20814 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.59	Nonpriority creditor's name and mailing address BST & Co., CPA's, LLP 10 British American Blvd Latham, NY 12110 Date(s) debt was incurred _____ Last 4 digits of account number <u>6027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,280.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.60	Nonpriority creditor's name and mailing address Buckley King 1400 Fifth Third Center Cleveland, OH 44114 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.61	Nonpriority creditor's name and mailing address Buckley Madole, P.C. 14841 Dallas Parkway, Suite 300 Dallas, TX 75254 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.62	Nonpriority creditor's name and mailing address C&C Lending 1844 Darrow Road Duanesburg, NY 12056 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address Calendar Call LLC 108 Roxbury Drive Commack, NY 11725 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,875.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address Caliber Home Loans 3701 Regent Blvd Irving, TX 75063 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address Cap Com FCU 4 Winners Circle Albany, NY 12205 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address Capital Affordable Housing Funding Corp 255 Orange Street Albany, NY 12210 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address Capital Bank/Chemung Canal Trust Company 1 Chemung Canal Plaza Elmira, NY 14901 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address Capital District Records Management Inc PO Box 4044 Clifton Park, NY 12065 Date(s) debt was incurred ____ Last 4 digits of account number <u>278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$252.93 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.69	Nonpriority creditor's name and mailing address Carnow Acceptance Corporation 2017 Central Ave. Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.70	Nonpriority creditor's name and mailing address Carrington Mortgage Services, LLC 1600 South Douglass Road, Suite 200 Anaheim, CA 92806 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.71	Nonpriority creditor's name and mailing address Carter Federal Credit Union 100 West Church Street Springhill, LA 71075 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.72	Nonpriority creditor's name and mailing address Casella Waste Mgt, Inc Williston, VT 05495-1372 Date(s) debt was incurred _____ Last 4 digits of account number <u>1707</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$126.18 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.73	Nonpriority creditor's name and mailing address Catherine Bradwell 2 Bergen Woods Drive Cohoes, NY 12047 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.74	Nonpriority creditor's name and mailing address Catholic & Community Credit Union 6100 West Main Street Belleville, IL 62223 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.75	Nonpriority creditor's name and mailing address Cenlar 425 Phillips Blvd Trenton, NJ 08618 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Name	Schiller, Knapp, Lefkowitz, & Hertzell, LLP	Case number (if known)	
3.76	Nonpriority creditor's name and mailing address CFAM Financial Services, LLC PO BOX 601329 Dallas, TX 75360 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.77	Nonpriority creditor's name and mailing address Chambles Math Carr PC 5720 Carmichael Road Montgomery, AL 36117 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.78	Nonpriority creditor's name and mailing address Champion Mortgage 11 Eves Dr Marlton, NJ 08053 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.79	Nonpriority creditor's name and mailing address Chittenden County Sheriff 70 Ethan Allen Drive, South Burlington, VT 05403 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.80	Nonpriority creditor's name and mailing address Chrono Solutions, LLC 1199 S. Belt Line Road Coppell, TX 75019 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.81	Nonpriority creditor's name and mailing address Circle Management Group, LLC P.O. Box 5091 High Point, NC 27262 Date(s) debt was incurred ____ Last 4 digits of account number <u>1918</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,037.50
3.82	Nonpriority creditor's name and mailing address City of Johnstown 33-41 East Main Street PO BOX 160 Johnstown, NY 12095 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.83	Nonpriority creditor's name and mailing address CLAIR & GJERTSEN 4 New King Street West Harrison, NY 10604 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.84	Nonpriority creditor's name and mailing address ClearSpring Loan Services, Inc. 5220 Tennyson Parkway Suite 200, Plano, TX 75024 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.85	Nonpriority creditor's name and mailing address CM Asset Management LLC PO Box 592 Berthoud, CO 80513 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.86	Nonpriority creditor's name and mailing address Cohn & Roth 100 East Old Country Road Mineola, NY 11501 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.87	Nonpriority creditor's name and mailing address Colonial Savings 2626 B West Freeway Fort Worth, TX 76102 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.88	Nonpriority creditor's name and mailing address Community Loan Servicing, LLC 4425 Ponce De Leon Blvd, 5th Floor Miami, FL 33146 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.89	Nonpriority creditor's name and mailing address Condor Capital Corp. 165 Oser Ave Hauppauge, NY 11788-8827 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.90	Nonpriority creditor's name and mailing address Cooksey, Toolen, Gage, Duffy & Woog 535 Anton Blvd., 10th Floor Costa Mesa, CA 92626 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.91	Nonpriority creditor's name and mailing address Costello, Cooney & Fearon, PLLC 5701 West Genesee Street Camillus, NY 13031 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.92	Nonpriority creditor's name and mailing address Court Solutions LLC 641 Lexington Avenue - Suite 1920 New York, NY 10022 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.93	Nonpriority creditor's name and mailing address CourtDrive 4500 Park Granada Blvd - Suite 202 Calabasas, CA 91302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$449.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.94	Nonpriority creditor's name and mailing address Covius Settlement Services, LLC 720 South Colorado Blvd - Suite 210 P.O. Box 469089 Denver, CO 80246 Date(s) debt was incurred _____ Last 4 digits of account number <u>Schiller & Knapp, LLP</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,671.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.95	Nonpriority creditor's name and mailing address Credit Union of Georgia 69 South Ave. Marietta, GA 30060 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.96	Nonpriority creditor's name and mailing address CTF Asset Management, LLC 117 Wrangler Drive Coppell, TX 75019 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.97	Nonpriority creditor's name and mailing address Dan Lombardi 187 Wolf Road Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address Dannemora Federal Credit Union 344 Tom Miller Road Plattsburgh, NY 12901 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address Davidson Fink LLP 400 Meridian Centre Blvd suite 200, Rochester, NY 14618 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	Nonpriority creditor's name and mailing address Dawson & Albritton, P.A. 204 E. Arlington Blvd Greenville, NC 27835 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.101	Nonpriority creditor's name and mailing address De Lage Landen 8001 Birchwood Court Johnston, IA 50131 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102	Nonpriority creditor's name and mailing address Deily & Schaefer, Esqs. One Bridge Street PO Box 489 Catskill, NY 12414 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103	Nonpriority creditor's name and mailing address Delano, Jeffrey & Delano, Pamela A. 600 Charlton Rd. Ballston Spa, NY 12020 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.104	Nonpriority creditor's name and mailing address Delta Community Credit Union Sibcy Cline Florence Office 4885 Houston Rd building suite 102 Florence, KY 41042 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.105	Nonpriority creditor's name and mailing address Den Adelsman Klub, Inc. 305 East 4th Street Jamestown, NY 14702 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.106	Nonpriority creditor's name and mailing address DGR Subpoena & Messenger Svc, Inc. 1359 Littleton Rd Morris Plains, NJ 07950-3000 Date(s) debt was incurred _____ Last 4 digits of account number <u>CH50</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$34,396.41 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107	Nonpriority creditor's name and mailing address DLM Conesus Lake Associates, LLC. 60 Waltham Ave Lancaster, NY 14086 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108	Nonpriority creditor's name and mailing address Dovenmuehle Mortgage, Inc. 1 Corporate Drive, Suite 360 Lake Zurich, IL 60047 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.109	Nonpriority creditor's name and mailing address DTF Asset Management, LLC 117 Wrangler Drive Irving, TX 75016 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.110	Nonpriority creditor's name and mailing address E-Law, LLC 219 South Street, Suite 102 New Providence, NJ 07974 Date(s) debt was incurred _____ Last 4 digits of account number <u>6724</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,263.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.111	Nonpriority creditor's name and mailing address Earle & Freeman PLC 107 State Street - 3rd Floor P.O. Box 1385 Montpelier, VT 05601-1385 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.112	Nonpriority creditor's name and mailing address East Coast Funding Group, Inc 277 Northern Blvd Great Neck, NY 11021 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.113	Nonpriority creditor's name and mailing address EasySoft Legal Software Three 2nd Street - Suite 501 Jersey City, NJ 07302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$138.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.114	Nonpriority creditor's name and mailing address Edwards Mental Health 7 Corporate Drive Clifton Park, NY 12065 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.115	Nonpriority creditor's name and mailing address Egress Software Technologies Inc One Marina Park Drive - Suite 1410 Boston, MA 02210 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.116	Nonpriority creditor's name and mailing address Eleanor Pers 12 Timberland Drive Albany, NY 12211 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.117	Nonpriority creditor's name and mailing address Emberly-Rayn Boncie 1011 Cheyenne Rd Schenectady, NY 12302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.118	Nonpriority creditor's name and mailing address Entec Consultants, Inc. 1200 New Loudon Road Cohoes, NY 12047 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.119	Nonpriority creditor's name and mailing address Eric Feldman & Associates, P.C. 123 W. Madison Street Chicago, IL 60602 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.120	Nonpriority creditor's name and mailing address Ernstrom & Drete, LLP 925 Clinton Square Rochester, NY 14604 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.121	Nonpriority creditor's name and mailing address Evans Petree, PC 1000 Ridgeway Loop Road, Suite 200 Memphis, TN 38120 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122	Nonpriority creditor's name and mailing address Evocative Dept LA 25225 Pasadena, CA 91185-5185 Date(s) debt was incurred _____ Last 4 digits of account number <u>2596</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,678.21 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123	Nonpriority creditor's name and mailing address Fannie Mae 780 Third Avenue, 9th Floor New York, NY 10017 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124	Nonpriority creditor's name and mailing address Fay Servicing, LLC 440 S. LaSalle, Suite 2000 Chicago, IL 60605 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.125	Nonpriority creditor's name and mailing address FCI Lender Services, Inc. P.O. Box 27370 Anaheim, CA 92809-0112 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126	Nonpriority creditor's name and mailing address Federal Express 942 South Shady Grove Road Memphis, TN 38120 Date(s) debt was incurred _____ Last 4 digits of account number <u>7923</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.127	Nonpriority creditor's name and mailing address Federal Home Loan Bank of New York 101 Park Avenue New York, NY 10178 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128	Nonpriority creditor's name and mailing address Fein, Such & Crane, LLP 7 Century Drive, Suite, 201 Parsippany, NJ 07054 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.129	Nonpriority creditor's name and mailing address Fidelity National Title Insurance Compan 80 State St Suite 10 Albany, NY 12207 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.130	Nonpriority creditor's name and mailing address Financial Asset Services, Inc. 17752 Mitchell N.Suite A Irvine, CA 92614 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.131	Nonpriority creditor's name and mailing address First Integrity Title 18201 Von Karman - Suite 330 Irvine, CA 92612 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,799.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.132	Nonpriority creditor's name and mailing address First Internet Bank 11201 USA Parkway Fishers, IN 46037 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address First National Bank of Scotia 201 Mohawk Avenue Schenectady, NY 12302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address First New York Federal Credit Union 2 Wall Street Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address First Niagara Bank, N.A. PO BOX 514 Lockport, NY 14095 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.136	Nonpriority creditor's name and mailing address Firstar Investors, LLC 25 Dogleg Lane Roslyn Heights, NY 11577 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address Firstar Motel, LLC 25 Dogleg Lane Roslyn Heights, NY 11577 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.138	Nonpriority creditor's name and mailing address Firstar West Court, LLC 25 Dogleg Lane Roslyn Heights, NY 11577 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.139	Nonpriority creditor's name and mailing address Flagship Credit Acceptance, LLC PO BOX 965 Chadds Ford, PA 19317 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140	Nonpriority creditor's name and mailing address Ford Motor Credit Company LLC PO BOX 6275 Dearborn, MI 48121 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.141	Nonpriority creditor's name and mailing address Fortune Title Agency, Inc. 39 Woodland Road Roseland, NJ 07068 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,113.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.142	Nonpriority creditor's name and mailing address Foundations Property Management, LLC 1528 Wharton Street Philadelphia, PA 19146 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143	Nonpriority creditor's name and mailing address FP Mailing Solutions 140 N. Mitchell Ct - Suite 200 Addison, IL 60101-5629 Date(s) debt was incurred _____ Last 4 digits of account number <u>6416</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$553.63 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.144	Nonpriority creditor's name and mailing address Franklin Credit Management Corporation 101 Hudson Street, 25th Floor Jersey City, NJ 07302 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.145	Nonpriority creditor's name and mailing address Freedom Mortgage 10500 Kincaid Drive Fishers, IN 46037 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

3.146	Nonpriority creditor's name and mailing address Freedom Truck Finance 421 W. Third Street Fort Worth, TX 76102 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.147	Nonpriority creditor's name and mailing address Friedman Vartolo LLP 85 Broad Street New York, NY 10004 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.148	Nonpriority creditor's name and mailing address Frontier Abstract & Researchers, Inc. 69 Cascade Drive - Suite 101 Rochester, NY 14614 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101,967.96
3.149	Nonpriority creditor's name and mailing address Fulton County Treasurer County Office Building 223 West Main Stree Johnstown, NY 12095 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.150	Nonpriority creditor's name and mailing address Galanis, Pollack, Jacobs & Johnson, S.C. 839 N. Jefferson Street, Suite 200 Milwaukee, WI 53202 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.151	Nonpriority creditor's name and mailing address Garden State Legal Services Corp. 600 Lawrence Road Lawrence Township, NJ 08648 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,049.00
3.152	Nonpriority creditor's name and mailing address Gary DiMauro Real Estate, Inc 58 Broadway Tivoli, NY 12583 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.153	Nonpriority creditor's name and mailing address Generation Mortgage Company 3565 piedmont Road Atlanta, GA 30305 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154	Nonpriority creditor's name and mailing address Getnick, Livingston, Atkinson & Priore, 258 Genesee Street Utica, NY 13502 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155	Nonpriority creditor's name and mailing address Gillespie Fuels & Propane, Inc 5197 Main Street Waitsfield, VT 05673 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.156	Nonpriority creditor's name and mailing address GITSIT Solutions, LLC 333 South Anita Drive, Suite 400 Orange, CA 92868 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.157	Nonpriority creditor's name and mailing address Gleichenhaus, Marchese & Weishaar PC 930 Convention Tower 43 Court St Buffalo, NY 14202-3100 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$900.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158	Nonpriority creditor's name and mailing address Glens Falls National Bank and Trust Comp 250 Glen Street Glens Falls, NY 12801 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159	Nonpriority creditor's name and mailing address GoAmerica, LLC 3115 S. Melrose Drive Carlsbad, CA 92010 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.160	Nonpriority creditor's name and mailing address Goldberger and Kremer 39 North Pearl Street, Suite 201 Albany, NY 12207 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address Great Lakes Credit Union PO BOX 1289 Deerfield, IL 60015 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Greater Commonwealth Investors Assoc. LP c/o H.L. Libby Corp. 803 Commonwealth Drive Warrendale, PA 15086 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,248.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Landlord - Pittsburgh</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Green Lake Homestead Inc 100 Harbor View Dr Port Washington, NY 11050 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address Green Mountain Power 163 Acorn Lane Colchester, VT 05446 Date(s) debt was incurred _____ Last 4 digits of account number <u>3493</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Green Planet Servicing, LLC 321 Research Pkwy Meriden, CT 06450 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.166	Nonpriority creditor's name and mailing address Green River Capital LLC 1670 Old Country Rd Ste 220 Plainview, NY 11803 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.167	Nonpriority creditor's name and mailing address Greene County Treasurer 411 Main Street Catskill, NY 12414 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168	Nonpriority creditor's name and mailing address Greenspoon Marder LLP Trade Centre South, Suite 700 100 West Cypress Road Fort Lauderdale, FL 33309 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.169	Nonpriority creditor's name and mailing address Gregory Funding, LLC PO Box 230579 Portland, OR 97281 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.170	Nonpriority creditor's name and mailing address Greystone Servicing Company LLC 419 Belle Air Lane Warrenton, VA 20186 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.171	Nonpriority creditor's name and mailing address Guaranty Bank 400 West Brown Deer Road Milwaukee, WI 53209 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.172	Nonpriority creditor's name and mailing address Guardian PO Box 677458 Dallas, TX 75267-7458 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.173	Nonpriority creditor's name and mailing address Habitat for Humanity of Dutchess County, 8 Neptune Road Poughkeepsie, NY 12601 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP <small>Name</small>	Case number (if known) _____
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3.174	Nonpriority creditor's name and mailing address Hagwood and Tipton PC ATTN: Amy Leslie PO Box 726 Paris, TN 38242 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.175	Nonpriority creditor's name and mailing address Hahn Loeser & Parks, LLP 200 Public Square # 2800 Cleveland, OH 44114 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.176	Nonpriority creditor's name and mailing address Handel & Carlini, LLP 62 E Main Street Wappingers Falls, NY 12590 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.177	Nonpriority creditor's name and mailing address Harris Beach, PLLC 99 Gamsey Road Pittsford, NY 14534 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.178	Nonpriority creditor's name and mailing address Headlands Asset Management 765 Baywood Drive, Suite 340 Petaluma, CA 94954 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.179	Nonpriority creditor's name and mailing address Hersher Capital Finance 30699 Russell Ranch Road Thousand Oaks, CA 91362 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.180	Nonpriority creditor's name and mailing address Highmark BSNENY 40 Century Hill Drive Latham, NY 12110 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$21,779.83 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Health Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.181	Nonpriority creditor's name and mailing address Hill Wallack, LLP 240 Cedar Knolls Road Cedar Knolls, NJ 07927 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.182	Nonpriority creditor's name and mailing address Hudson Heritage Federal Credit Union 25 Rykowski Lane Middletown, NY 10941 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.183	Nonpriority creditor's name and mailing address Hudson Valley Credit Union 137 Boardman Road Poughkeepsie, NY 12603 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.184	Nonpriority creditor's name and mailing address Hyundai Capital America dba Kia Motor Fi 10550 Talbert Avenue Fountain Valley, CA 92728-0809 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.185	Nonpriority creditor's name and mailing address i-Evolve 501 John James Audubon Parkway - Suite 2 Buffalo, NY 14228 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.186	Nonpriority creditor's name and mailing address Ianniello Anderson, PC 8 Airline Drive Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.187	Nonpriority creditor's name and mailing address IMail Tracking, LLC 9620 Ridgehaven Court - Suite A San Diego, CA 92123 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,474.88 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.188	Nonpriority creditor's name and mailing address Innovate Loan Servicing 4704 Mercantile Drive Fort Worth, TX 76137 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.189	Nonpriority creditor's name and mailing address Internet Marketing Ninjas 3 Orchard Drive Queensbury, NY 12804 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.190	Nonpriority creditor's name and mailing address IPFS 3522 Thomasville Road - Suite 400, Tallahassee, FL 32309 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,707.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Cyber Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.191	Nonpriority creditor's name and mailing address IPFS 170 Northpointe Parkway - Suite 300 Buffalo, NY 14228 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75,475.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>E&O Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.192	Nonpriority creditor's name and mailing address J. Ward Holliday & Associates, P.C. 5930 Royal Lane, Suite 279 Dallas, TX 75230 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.193	Nonpriority creditor's name and mailing address JAYA Properties LLC 151 Wentworth Avenue Albertson, NY 11507 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.194	Nonpriority creditor's name and mailing address JDRMDBPP,SM,SKP & JD IRA LLC 408 Main Street Boonton, NJ 07005 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.195	Nonpriority creditor's name and mailing address Jefferson Capital Systems, LLC 16 McLeland Rd. Saint Cloud, MN 56303 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.196	Nonpriority creditor's name and mailing address Jerome Spitzer Jerome Spitzer New York, NY 10016 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.197	Nonpriority creditor's name and mailing address Joann Cummings 5 Sweeney Rd Mechanicville, NY 12118 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.198	Nonpriority creditor's name and mailing address John A. Hamelin 160 East Avenue Saratoga Springs, NY 12866 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.199	Nonpriority creditor's name and mailing address John H. Fisher, P.C. 278 Wall Street Kingston, NY 12401 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.200	Nonpriority creditor's name and mailing address John Joseph Gable, Esq. 17 British American Blvd. Latham, NY 12110 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.201	Nonpriority creditor's name and mailing address JP&R Advertising Agency, Inc. 305 Broadway, Suite 200 New York, NY 10007 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,106.95 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.202	Nonpriority creditor's name and mailing address KeyBank National Association 127 Public Square Cleveland, OH 44114 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.203	Nonpriority creditor's name and mailing address Keystone Asset Management, Inc. 890 Forty Foot Road Lansdale, PA 19446 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.204	Nonpriority creditor's name and mailing address Kirkland Financial LLC 3000 Business Park Circle, Suite 500 Goodlettsville, TN 37072 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.205	Nonpriority creditor's name and mailing address Knuckles & Komosinski, PC 220 White Plains Road, 6th Floor Tarrytown, NY 10591 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.206	Nonpriority creditor's name and mailing address Kozeny, McCubbin & Katz, LLP 395 North Service Road, Suite 401 Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.207	Nonpriority creditor's name and mailing address Kubota Credit Corporation 6300 at One Kubota Way Groveport, OH 43125 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.208	Nonpriority creditor's name and mailing address Lakeview Loan Servicing 4425 Ponce de Leon MS 5-251 Miami, FL 33146 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.209	Nonpriority creditor's name and mailing address Land Home Financial Services, Inc 228 Park Avenue South # 67157 New York, NY 10003 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.210	Nonpriority creditor's name and mailing address Law Offices of Gary Holt 2356 Moore St. San Diego, CA 92110 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.211	Nonpriority creditor's name and mailing address Law Offices of Jeffrey W. Shub 27 Congress Street Salem, MA 01970 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.212	Nonpriority creditor's name and mailing address Lease and Rental Management Corp. 45 Haverhill Street ATTN: Mary Hawkins Andover, MA 01810 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.213	Nonpriority creditor's name and mailing address Lease Plan U.S.A., Inc. 1165 Sanctuary Parkway Alpharetta, GA 30009 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.214	Nonpriority creditor's name and mailing address Lee & Mason Financial Services, Inc. 719 State Route 30 Northville, NY 12134 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.215	Nonpriority creditor's name and mailing address Lefkoff, Rubin & Gleason 5555 Glenridge Connector NE, Suite 900 Atlanta, GA 30342-4762 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.216	Nonpriority creditor's name and mailing address Lefkoff, Rubin, Gleason, Russo & William 5555 Glenridge Connector NE, Suite 900 Atlanta, GA 30342 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.217	Nonpriority creditor's name and mailing address Lehrman, Lehrman & Guterman LLP 199 Main Street White Plains, NY 10601 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.218	Nonpriority creditor's name and mailing address Lemery Greisler LLC 677 Broadway, 8th Floor Albany, NY 12207 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.219	Nonpriority creditor's name and mailing address LenderLive Settlement Services LLC 1044 Main Street, Suite 700 Kansas City, MO 64105 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.220	Nonpriority creditor's name and mailing address Leopold & Associates, PLLC 80 Business Park Drive, Suite 110 Armonk, NY 10504 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.221	Nonpriority creditor's name and mailing address Levin & Glasser, P.C. 420 Lexington Avenue New York, NY 10170 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.222	Nonpriority creditor's name and mailing address Levine & Block PO Box 422148 Atlanta, GA 30342 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.223	Nonpriority creditor's name and mailing address Licolen Archives Inc. 155 Great Arrow Ave Buffalo, NY 14207 Date(s) debt was incurred _____ Last 4 digits of account number <u>900</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.224	Nonpriority creditor's name and mailing address Lipse, Morrison, Waller & Lipsey, PC 1430 Island Home Avenue Knoxville, TN 37920 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.225	Nonpriority creditor's name and mailing address Little Motors 363 Central Avenue Albany, NY 12206 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.226	Nonpriority creditor's name and mailing address Live Oak Bank 1741 Tiburon Drive Wilmington, NC 28403 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.227	Nonpriority creditor's name and mailing address Loan Portfolio Servicing 6750 Locke Ave. Fort Worth, TX 76116 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.228	Nonpriority creditor's name and mailing address LoanCare- A ServiceLink Company 3637 Sentara Wat Virginia Beach, VA 23452 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.229	Nonpriority creditor's name and mailing address Local 888, UFCW Attn: Michael C. Anderson, Esq. Elmsford, NY 10523-1955 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.230	Nonpriority creditor's name and mailing address M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203 Date(s) debt was incurred _____ Last 4 digits of account number <u>9263</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.231	Nonpriority creditor's name and mailing address M. J. Peterson - 200 Audubon, LLC 200 John James Audubon Parkway Suite 300 Buffalo, NY 14228 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$16,985.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Landlord - Buffalo</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.232	Nonpriority creditor's name and mailing address Macey, Wilensky, Kessler & Hennings, LLC 303 Peachtree Street NE, Suite 4420 Atlanta, GA 30308 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.233	Nonpriority creditor's name and mailing address Mackie Wolf Zientz & Mann, P.C. 124 W. Capitol Ave. Little Rock, AR 72201 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.234	Nonpriority creditor's name and mailing address Marcia & Jules Patricof PO BOX 427 Woodmere, NY 11598 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.235	Nonpriority creditor's name and mailing address Marilyn Krupnick 4 Dyers Court East Setauket, NY 11733 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.236	Nonpriority creditor's name and mailing address Mariners Companies 1303 Avocado Ave Suite 200 Newport Beach, CA 92660 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.237	Nonpriority creditor's name and mailing address Martin, Oliveira & Hamel 75 South Church St., Suite 550 Pittsfield, MA 01201 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.238	Nonpriority creditor's name and mailing address Marvin and Marvin, PLLC PO BOX 151, 44 West Market Street Rhinebeck, NY 12572 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.239	Nonpriority creditor's name and mailing address McCabe, Weisberg & Conway PC 123 South Broad Street Suite 1400 Philadelphia, PA 19109 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.240	Nonpriority creditor's name and mailing address McCalla Raymer Leibert Pierce, LLC 1544 Old Alabama Road Roswell, GA 30076 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.241	Nonpriority creditor's name and mailing address McCarthy Holthus, LLP 108 First Avenue South - Suite 300 Seattle, WA 98104 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.242	Nonpriority creditor's name and mailing address McManimon, Scotland & Baumann, LLC 75 Livingston Avenue Roseland, NJ 07068 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.243	Nonpriority creditor's name and mailing address McMichael Taylor Gray, LLC. 3550 Engineering Dr - Suite 260 Norcross, GA 30092 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,261.86 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.244	Nonpriority creditor's name and mailing address Mercedes-Benz Financial Services USA LLC 14372 Heritage Pkwy Fort Worth, TX 76177 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.245	Nonpriority creditor's name and mailing address MetLife P.O. Box 783895 Philadelphia, PA 19178-3895 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll Expense - Ongoing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.246	Nonpriority creditor's name and mailing address Michael A. Alfieri, Esq. 30 Freneau Ave # 2A Matawan, NJ 07747 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.247	Nonpriority creditor's name and mailing address Michael Andrews and Associates LLC POB 3875 Southfield, MI 48037-3875 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.248	Nonpriority creditor's name and mailing address Michael Benson 2525 County Route 5 New Lebanon, NY 12125 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.249	Nonpriority creditor's name and mailing address Michael F. Smith 12 Timberland Drive Albany, NY 12211 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.250	Nonpriority creditor's name and mailing address Michael J. Biscone 151 Main St Ravena, NY 12143 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.251	Nonpriority creditor's name and mailing address Mid Florida Financing LLC 1200 West Memorial Blvd Lakeland, FL 33815 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.252	Nonpriority creditor's name and mailing address Mid-Hudson Valley Federal Credit Union PO BOX 1429 1099 Morton Blvd Kingston, NY 12401 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.253	Nonpriority creditor's name and mailing address MidCountry Bank 7825 Washington Avenue South, Ste 120 Minneapolis, MN 55439 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.254	Nonpriority creditor's name and mailing address Middlesex County Sheriff 701 Livingston Avenue, New Brunswick, NJ 08901 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.255	Nonpriority creditor's name and mailing address Midland Mortgage 999 NW Grand Blvd Oklahoma City, OK 73118 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.256	Nonpriority creditor's name and mailing address Millsap & Singer, LLC 612 Spirit Drive Chesterfield, MO 63005 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.257	Nonpriority creditor's name and mailing address Monaghan Safar Ducham PLCC 156 Battery Street Burlington, VT 05401 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.258	Nonpriority creditor's name and mailing address Monmouth County Sheriff 2500 Kozloski Road, Freehold, NJ 07728 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.259	Nonpriority creditor's name and mailing address Mortgage America 1425 Grape Street Whitehall, PA 18052 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.260	Nonpriority creditor's name and mailing address Mortgage of America 1425 Grape Street Whitehall, PA 18052 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.261	Nonpriority creditor's name and mailing address Naiman Law Group, PC 4660 La Jolla Drive, Suite 650 San Diego, CA 92122 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.262	Nonpriority creditor's name and mailing address National Bank of Coxsackie 3-7 Reed Street PO Box 400 Coxsackie, NY 12051 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.263	Nonpriority creditor's name and mailing address National Business Technologies 15 Corporate Circle Albany, NY 12203 Date(s) debt was incurred _____ Last 4 digits of account number <u>SA03</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$576.43 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.264	Nonpriority creditor's name and mailing address National Grid 300 Erie Blvd West, Syracuse, NY 13202-0960 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$497.64 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.265	Nonpriority creditor's name and mailing address National Response Corp. 19 National Dr. Franklin, MA 02038 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.266	Nonpriority creditor's name and mailing address Nationstar Mortgage, LLC d/b/a Mr. Coope 350 Highland Drive Lewisville, TX 75067 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.267	Nonpriority creditor's name and mailing address Nationwide Court Services Inc. 761 Koehler Ave. - Suite A Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number <u>SCHKNA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.268	Nonpriority creditor's name and mailing address Nelson Law Group, PLLC 761 Koehler Ave. - Suite A Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number <u>SCHKNA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.269	Nonpriority creditor's name and mailing address Nesson, Barry, Esq. 700 White Plains Road Scarsdale, NY 10583 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.270	Nonpriority creditor's name and mailing address NetDirector, LLC 3450 Buschwood Park Drive - Suite 110 Tampa, FL 33618 Date(s) debt was incurred _____ Last 4 digits of account number <u>AK01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$955.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.271	Nonpriority creditor's name and mailing address New England Newspapers P.O. Box 1171 Pittsfield, MA 01202 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,138.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.272	Nonpriority creditor's name and mailing address Nicholas Financial, Inc. 2454 McMullen Booth Rd., Bldg C Clearwater, FL 33759 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.273	Nonpriority creditor's name and mailing address NLR, Inc. 4 Revay Road East Windsor, CT 06088 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.274	Nonpriority creditor's name and mailing address Normandy Corporation 46 Prince Street Rochester, NY 14607 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.275	Nonpriority creditor's name and mailing address North Atlantic Capital Fund I, LLC. 50 Portland Pier Portland, ME 04101 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.276	Nonpriority creditor's name and mailing address Note Resolutions, LLC 1135 Clifton Ave, Suite 204 Clifton, NJ 07013 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.277	Nonpriority creditor's name and mailing address Notecraft Capital, LLC 1619 51st Street Seattle, WA 98103 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.278	Nonpriority creditor's name and mailing address Numerica Credit Union P.O. Box 4000 Veradale, WA 99037 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.279	Nonpriority creditor's name and mailing address Ocean County Sheriff 120 Hooper Avenue Toms River, NJ 08753 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.280	Nonpriority creditor's name and mailing address OceanFirst Bank 907 Route 8 South Cape May Court House, NJ 08210 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.281	Nonpriority creditor's name and mailing address Ocwen Loan Servicing, LLC 4828 Loop Central Drive Houston, TX 77081 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.282	Nonpriority creditor's name and mailing address Old Heritage Realty Services, LLC 4 Winners Circle Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.283	Nonpriority creditor's name and mailing address Old Republic National Title Insurance Co 1200 Liberty Ridge Drive Wayne, PA 19087 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.284	Nonpriority creditor's name and mailing address OneMain Financial Group, LLC 601 NW Second Street Evansville, IN 47708 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.285	Nonpriority creditor's name and mailing address Optimum 1111 Stewart Ave, Bethpage, NY 11714-3581 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$107.73 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.286	Nonpriority creditor's name and mailing address Overit Multimedia, Inc. 435 New Scotland Avenue Albany, NY 12208 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.287	Nonpriority creditor's name and mailing address PAC Abstract & Title Services LLC 36 British American Blvd - Suite 102 Latham, NY 12110 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$852.00
3.288	Nonpriority creditor's name and mailing address PACCAR Financial Corp 777 106th Ave NE Bellevue, WA 98004 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.289	Nonpriority creditor's name and mailing address PACER Service Center P.O. Box 780549 San Antonio, TX 78278 Date(s) debt was incurred ____ Last 4 digits of account number <u>5540</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,712.60
3.290	Nonpriority creditor's name and mailing address Padfield & Stout, LLP 421 W. Third Street Fort Worth, TX 76102 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.291	Nonpriority creditor's name and mailing address Padgett Law Group 5501 LBJ Freeway, Suite 925 Dallas, TX 75240 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.292	Nonpriority creditor's name and mailing address Paul B. Knapp, Esq 422 Pinkster Ln Slingerlands, NY 12159 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP <small>Name</small>	Case number (if known) _____
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3.293	Nonpriority creditor's name and mailing address PC Law Time Matters LLC 2235 Gateway Access Point - Suite 300 Raleigh, NC 27607 Date(s) debt was incurred _____ Last 4 digits of account number <u>1099</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,055.56 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.294	Nonpriority creditor's name and mailing address PDA Corporate Stores Division I, LLC 75-1160563 Dept #161, P.O. Box 1000 Memphis, TN 38148-0161 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$247.02 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.295	Nonpriority creditor's name and mailing address Peet Law Group 55 Patchen Road South South Burlington, VT 05403 Date(s) debt was incurred _____ Last 4 digits of account number <u>Schiller Knapp</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,642.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.296	Nonpriority creditor's name and mailing address Pellegrino Law PLLC 1617 John F. Kennedy Blvd Suite 1888 Philadelphia, PA 19103 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$135.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.297	Nonpriority creditor's name and mailing address PennyMac Loan Sevices, LLC 6101 Condor Drive Moorpark, CA 93021 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.298	Nonpriority creditor's name and mailing address Peritus Portfolio Services LLC PO BOX 93991 Southlake, TX 76092 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.299	Nonpriority creditor's name and mailing address Perl Land Development Corp 2024 W HENRIETTA RD Rochester, NY 14623 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertzell, LLP <small>Name</small>	Case number (if known) _____
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3.300	Nonpriority creditor's name and mailing address PHH Mortgage 1 Mortgage Way Mount Laurel, NJ 08054 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.301	Nonpriority creditor's name and mailing address Planet Home Lending, LLC. 321 Research Parkway Meriden, CT 06450 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.302	Nonpriority creditor's name and mailing address PNJ Technology Partners, Inc 426 New Karner Road Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50,896.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.303	Nonpriority creditor's name and mailing address Polow & Polow PLLC 125 Main Street Hyde Park, VT 05655 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$658.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.304	Nonpriority creditor's name and mailing address Portfolio Recovery Associates, Inc. 120 Corporate Boulevard Norfolk, VA 23502 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.305	Nonpriority creditor's name and mailing address Power Play Partners, LLC P.O. Box 484 Clarence Center, NY 14032 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,420.83 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Landlord - Buffalo</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.306	Nonpriority creditor's name and mailing address Poyner Spruill 301 S. College Street #2900 Charlotte, NC 28202 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.307	Nonpriority creditor's name and mailing address Prenovost, Normandin, Dawe & Rocha 2122 North Broadway, Suite 200 Santa Ana, CA 92706 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.308	Nonpriority creditor's name and mailing address Prestige Financial Services, Inc. PO BOX 26707 Salt Lake City, UT 84126 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.309	Nonpriority creditor's name and mailing address Primary Residential Mortgage, Inc. 1480 N 2200 W Salt Lake City, UT 84116 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.310	Nonpriority creditor's name and mailing address Primo Water/Crystal Rock 200 Eagles Landing Blvd, Lakeland, FL 33810 Date(s) debt was incurred _____ Last 4 digits of account number <u>8472</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.311	Nonpriority creditor's name and mailing address Prober & Raphael, A Law Corporation 20750 Ventura Blvd, Suite 100 Woodland Hills, CA 91364 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.312	Nonpriority creditor's name and mailing address Professional Appearances, Inc. 407 Essex St Millburn, NJ 07041 Date(s) debt was incurred _____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.313	Nonpriority creditor's name and mailing address Progressive Credit Union 131 West 33rd Street New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.314	Nonpriority creditor's name and mailing address ProVest LLC 7702 Woodland Center Blvd - Suite 100 Tampa, FL 33614 Date(s) debt was incurred _____ Last 4 digits of account number <u>3257,3403,4463</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$78,470.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.315	Nonpriority creditor's name and mailing address Prozzo Auctions RMP Enterprises, Inc, 207 North Main Street Rutland, VT 05701 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.316	Nonpriority creditor's name and mailing address Publication Elite Company, Inc 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$129,459.84 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.317	Nonpriority creditor's name and mailing address Pulvers,Pulvers,Thompson & Friedman, LLP 950 Third Ave, 11th Floor New York, NY 10022 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,550.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.318	Nonpriority creditor's name and mailing address Puzzle HR 4030 West Boy Scout Blvd - suite 325 Tampa, FL 33607 Date(s) debt was incurred _____ Last 4 digits of account number <u>1636</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.319	Nonpriority creditor's name and mailing address Quandis, Inc 30021 Tomas Ste 200, Rancho Santa Margarita, CA 92688 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$706.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.320	Nonpriority creditor's name and mailing address RAC title Search, Inc Metro Office Park 7 - Street 1 - Suite 2 Guaynabo, PR 00968 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.321	Nonpriority creditor's name and mailing address Radharani Properties LLC 151 Wentworth Avenue Albertson, NY 11507 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.322	Nonpriority creditor's name and mailing address Real Time Resolutions, Inc. 1349 Empire Central Drive Dallas, TX 75247-4029 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.323	Nonpriority creditor's name and mailing address Reed & Reed Attorneys at Law 101 E Lumsden Road Brandon, FL 33511 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.324	Nonpriority creditor's name and mailing address Regional Acceptance Corporation 500 Willowbrook Office Park #575 Fairport, NY 14450 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.325	Nonpriority creditor's name and mailing address Renob, LLC c/o The Falcon Group 95 Mount Bethel Road Warren, NJ 07059 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,573.58 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Landlord - NJ</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.326	Nonpriority creditor's name and mailing address Resnet 27442 Portola Parkway, Foothill Ranch, CA 92610 Date(s) debt was incurred _____ Last 4 digits of account number <u>0678</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$130.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.327	Nonpriority creditor's name and mailing address Resurgent Capital Services PO BOX 10587 15 South Main Street, Suite 401 Greenville, SC 29601 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.328	Nonpriority creditor's name and mailing address Reverse Mortgage Solutions, Inc. 14405 Walters Road Houston, TX 77014-1345 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.329	Nonpriority creditor's name and mailing address Rhinebeck Bank 2 Jefferson Plaza Poughkeepsie, NY 12601 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.330	Nonpriority creditor's name and mailing address Richard C. Wayne & Associates, P.C. 24 Lenox Pointe Atlanta, GA 30324 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.331	Nonpriority creditor's name and mailing address Riehman Shafer & Shaw, LLC 7693 Route 281 Tully, NY 13159 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.332	Nonpriority creditor's name and mailing address RIS Insulation Supply 1177 Commerce Blvd. Midway, FL 32343 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.333	Nonpriority creditor's name and mailing address Rivermark Community Credit Union PO Box 4040 Beaverton, OR 97006 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.334	Nonpriority creditor's name and mailing address Robertson, Anschutz & Schneid, PL (RAS) 6409 Congress Ave, Suite 100 Boca Raton, FL 33487 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.335	Nonpriority creditor's name and mailing address Robinowitz Cohlan Dubow & Doherty LLP 199 Main Street White Plains, NY 10601-3171 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.336	Nonpriority creditor's name and mailing address Rockland Employees Federal Credit Union 170 East Cental Avenue, Rte 59 West Spring Valley, NY 10977 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.337	Nonpriority creditor's name and mailing address Rondout Savings Bank ATTN: Sara Morrissey Kingston, NY 12401 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.338	Nonpriority creditor's name and mailing address RoundPoint Mortgage Servicing Corporatio 5016 Parkway Plaza Blvd Charlotte, NC 28217 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.339	Nonpriority creditor's name and mailing address Rushmore Loan Management Services LLC 15480 Laguna Canyon Road Irvine, CA 92618 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.340	Nonpriority creditor's name and mailing address Rutland County Sheriff 88 Grove Street Rutland, VT 05701 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.341	Nonpriority creditor's name and mailing address Ryan Hertz, Esq. 25 Amity Point Clifton Park, NY 12065 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.342	Nonpriority creditor's name and mailing address Sagent M&C, LLC 100 Continental Dr - Suite 500, King of Prussia, PA 19406 Date(s) debt was incurred _____ Last 4 digits of account number <u>0497</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.343	Nonpriority creditor's name and mailing address Samuel Kramer, Attorney at Law 10 Pantigo Road East Hampton, NY 11937 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.344	Nonpriority creditor's name and mailing address Sapirstein and Sapirstein 1350 Main Street, 12th Floor Springfield, MA 01103 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.345	Nonpriority creditor's name and mailing address Sarah Delane 8 Spruce Street Clifton Park, NY 12065 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.346	Nonpriority creditor's name and mailing address Saratoga National Bank and Trust Company 171 South Broadway Saratoga Springs, NY 12866 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.347	Nonpriority creditor's name and mailing address Schaap Moving Systems, Inc 6 Brown Road Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>Schiller, Knapp LLP</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.348	Nonpriority creditor's name and mailing address Schoharie County Treasurer PO Box 9 Schoharie, NY 12157 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.349	Nonpriority creditor's name and mailing address School Systems Federal Credit Union 325 Washington Avenue Extension Albany, NY 12205 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.350	Nonpriority creditor's name and mailing address Secured Equity Financial 1192 E. Draper Pkwy Farmington, NM 87402 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.351	Nonpriority creditor's name and mailing address SEFCU 700 Patroon Creek Road Albany, NY 12206 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.352	Nonpriority creditor's name and mailing address Seidman & Pincus, LLC 777 Terrace Avenue, Suite 508 Hasbrouck Heights, NJ 07604 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.353	Nonpriority creditor's name and mailing address Select Portfolio Servicing, Inc. 3217 S Decker Lake Drive Salt Lake City, UT 84119 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.354	Nonpriority creditor's name and mailing address Selene Finance 8201 Cypress Plaza Drive Jacksonville, FL 32256 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.355	Nonpriority creditor's name and mailing address Self Reliance Federal Credit Union 108 Second Avenue New York, NY 10003 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.356	Nonpriority creditor's name and mailing address Seneca Mortgage Servicing, LLC 611 Jamison Road Elma, NY 14059 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.357	Nonpriority creditor's name and mailing address ServiceLink, LLC 3220 El Camino Real Irvine, CA 92602 Date(s) debt was incurred ____ Last 4 digits of account number <u>4785</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,030.00
3.358	Nonpriority creditor's name and mailing address Seterus Inc. 3039 Cornwallis Road, Building 203 #AA14 Durham, NC 27709 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.359	Nonpriority creditor's name and mailing address Severson & Werson One Embarcadero Center San Francisco, CA 94111 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.360	Nonpriority creditor's name and mailing address Shapiro, Dicaro & Barak, LLC 175 Mile Crossing Boulevard Rochester, NY 14624 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.361	Nonpriority creditor's name and mailing address Shapiro, Pendergast & Hasty 211 Perimeter Center Parkway, NE Atlanta, GA 30346 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.362	Nonpriority creditor's name and mailing address Shellpoint Mortgage Servicing 55 Beattie Place, Suite 100 Greenville, SC 29601 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.363	Nonpriority creditor's name and mailing address Skopos Financial, LLC 500 E John Carpenter FWY Irving, TX 75062 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.364	Nonpriority creditor's name and mailing address SN Servicing Corporation 323 Fifth Street Eureka, CA 95501 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.365	Nonpriority creditor's name and mailing address Specialized Loan Servicing, LLC 6200 S. Quebec Street Englewood, CO 80111 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.366	Nonpriority creditor's name and mailing address Spectrum Business 400 Washington Blvd Stamford, CT 06902 Date(s) debt was incurred _____ Last 4 digits of account number <u>3203</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$279.97 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.367	Nonpriority creditor's name and mailing address Springleaf Finance, Inc. 601 N.W. Second Street Evansville, IN 47708 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.368	Nonpriority creditor's name and mailing address Sprout Mortgage 4600 Fuller Drive, Suite 350 Irving, TX 75038 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.369	Nonpriority creditor's name and mailing address Statebridge Company, LLC 6061 S Willow Drive, Suite 300 Englewood, CO 80111 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.370	Nonpriority creditor's name and mailing address Stewart Title Guaranty Company 200 Fifth Avenue, Suite 301 Waltham, MA 02451 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.371	Nonpriority creditor's name and mailing address Stewart, Zlimer & Jungers, LTD 2860 Patton Road Saint Paul, MN 55113 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.372	Nonpriority creditor's name and mailing address STK Janitorial Services, Inc 126 Stone Quarry Road Clifton Park, NY 12065 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.373	Nonpriority creditor's name and mailing address Stolat Financial LLC 744 E. Superior Street Duluth, MN 55802 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.374	Nonpriority creditor's name and mailing address STOX Posting & Publishing LLC 2701 Transit Road - Suite 139 Elma, NY 14059 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$140,213.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.375	Nonpriority creditor's name and mailing address STOX Pro Serve 2701 Transit Road - Suite 140 Elma, NY 14059 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50,047.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.376	Nonpriority creditor's name and mailing address Suffolk County Sheriff 200 Suffolk Avenue Yaphank, NY 11980 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

3.377	Nonpriority creditor's name and mailing address Suncoast Schools Federal Credit Union Mail Code: COL 002 Tampa, FL 33680 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.378	Nonpriority creditor's name and mailing address Sunmark Credit Union 1187 Troy Schenectady Road Latham, NY 12110 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.379	Nonpriority creditor's name and mailing address Suntrust Mortgage, Inc. 6225 N Croatan Hwy, Suite D Kitty Hawk, NC 27949 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.380	Nonpriority creditor's name and mailing address TD Auto Finance LLC 4600 Touchion Road, Building 100, Suite 400 Jacksonville, FL 32245 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.381	Nonpriority creditor's name and mailing address TD Bank, N.A. PO Box 551080 Jacksonville, FL 32255 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.382	Nonpriority creditor's name and mailing address Teal Becker & Chiaramonte 7 Washington Square Albany, NY 12205 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
3.383	Nonpriority creditor's name and mailing address Teligent IP 8156 S Wadsworth Blvd - Suite E354 Littleton, CO 80128-9114 Date(s) debt was incurred ____ Last 4 digits of account number <u>1781</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.384 Nonpriority creditor's name and mailing address

Ten Eyck Group
1924 Western Avenue
Albany, NY 12203

Date(s) debt was incurred

Last 4 digits of account number n/a

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Insurance Carrier

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.385 Nonpriority creditor's name and mailing address

The Adirondack Trust Company
473 Broadway
Saratoga Springs, NY 12866

Date(s) debt was incurred

Last 4 digits of account number n/a

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.386 Nonpriority creditor's name and mailing address

The Data Center
426 New Karner Road
Albany, NY 12205

Date(s) debt was incurred

Last 4 digits of account number SLH

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Vendor

Is the claim subject to offset? ☒ No ☐ Yes

\$85,463.05

3.387 Nonpriority creditor's name and mailing address

The Delaware National Bank of Delhi
124 Main Street
Delhi, NY 13753

Date(s) debt was incurred

Last 4 digits of account number n/a

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.388 Nonpriority creditor's name and mailing address

The Hartford Financial Services Group
One Hartford Plaza
Hartford, CT 06155

Date(s) debt was incurred

Last 4 digits of account number 0001

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Insurance

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.389 Nonpriority creditor's name and mailing address

The Money Source
3138 East Elwood Street
Phoenix, AZ 85034

Date(s) debt was incurred

Last 4 digits of account number n/a

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.390 Nonpriority creditor's name and mailing address

The Murray Law Firm
10 Maxwell Drive
Clifton Park, NY 12065

Date(s) debt was incurred

Last 4 digits of account number n/a

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.391	Nonpriority creditor's name and mailing address The Newman-Kelton Group, LLC 11 Sunset Dr Latham, NY 12110 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.392	Nonpriority creditor's name and mailing address The Olsen Law Firm, LLC 118 Conistor St Suite B290 Liberty, MO 64068 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.393	Nonpriority creditor's name and mailing address The Sundmaker Firm 1027 Ninth Street New Orleans, LA 70115 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.394	Nonpriority creditor's name and mailing address Thomas Reed 111 Hollow Road Amsterdam, NY 12010 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.395	Nonpriority creditor's name and mailing address Thomson Reuters 610 Opperman Dr, Saint Paul, MN 55123-1396 Date(s) debt was incurred ____ Last 4 digits of account number <u>9000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,365.30
3.396	Nonpriority creditor's name and mailing address Three Charms, LLC PO Box 88 Waitsfield, VT 05673 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commercial Landlord</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.397	Nonpriority creditor's name and mailing address TitleMax of Delaware, Inc. 3401 Kirkwood Hwy Wilmington, DE 19808 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

3.398	Nonpriority creditor's name and mailing address TitleMax of Ohio, Inc. 4613 Northfield Road Cleveland, OH 44128 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.399	Nonpriority creditor's name and mailing address TJC Process Service, LTD 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,767.06
3.400	Nonpriority creditor's name and mailing address Tom & Lisa Dougherty 116 Willow Street Guilderland, NY 12084 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.401	Nonpriority creditor's name and mailing address Toyota Motor Credit Corporation 19001 South Western Avenue Torrance, CA 90509 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.402	Nonpriority creditor's name and mailing address TrailNorth Federal Credit Union 1178 NYS RTE 9N Ticonderoga, NY 12883 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.403	Nonpriority creditor's name and mailing address TransAmerica Financial Life Insurance 6400 C St. SW Cedar Rapids, IA 52499 Date(s) debt was incurred ____ Last 4 digits of account number <u>UNKN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Benefits Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.404	Nonpriority creditor's name and mailing address Triad Financial Services 13901 Sutton Park Dr. S, Suite 300 Jacksonville, FL 32224 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.405	Nonpriority creditor's name and mailing address Tronconi Segarra & Associates LLP 8321 Main Street, Buffalo, NY 14221 Date(s) debt was incurred _____ Last 4 digits of account number <u>2424</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.406	Nonpriority creditor's name and mailing address Trott Law 31440 Northwestern Highway Farmington, MI 48334 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.407	Nonpriority creditor's name and mailing address Troy Sand & Gravel Co., Inc. River Street Mechanicville, NY 12118 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.408	Nonpriority creditor's name and mailing address TruNorthern Federal Credit Union 494 East Main Street Malone, NY 12953 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.409	Nonpriority creditor's name and mailing address Tuthill Finance 60 Katona Drive, Suite 26 Fairfield, CT 06824 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.410	Nonpriority creditor's name and mailing address UFirst Federal Credit Union 274 Rugar Street Plattsburgh, NY 12901 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.411	Nonpriority creditor's name and mailing address Ulster County 244 Fair Street Kingston, NY 12401-0906 Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.412	<p>Nonpriority creditor's name and mailing address</p> <p>Ulster Savings Bank 180 Schwenk Drive Kingston, NY 12401</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.413	<p>Nonpriority creditor's name and mailing address</p> <p>University Bank 29777 Telegraph Rd Southfield, MI 48034</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.414	<p>Nonpriority creditor's name and mailing address</p> <p>USFN 9001 Airport Freeway - Suite 740 North Richland Hills, TX 76180</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,283.35
3.415	<p>Nonpriority creditor's name and mailing address</p> <p>Valon Mortgage Inc. 3100 West Ray Road, Suite 201 Chandler, AZ 85226</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.416	<p>Nonpriority creditor's name and mailing address</p> <p>Vantage Credit Union 4020 Fee Fee Road Bridgeton, MO 63044</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.417	<p>Nonpriority creditor's name and mailing address</p> <p>Velocity Commercial Capital, LLC 30699 Russell Ranch Rd, Suite 295 Thousand Oaks, CA 91362</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>n/a</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.418	<p>Nonpriority creditor's name and mailing address</p> <p>Verizon Wireless Bankruptcy Administrati 500 Technology Drive, Suite 550 Saint Charles, MO 63304</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>UNKN</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,133.14

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known) _____
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3.419	Nonpriority creditor's name and mailing address Village Clerk for Village of Fort Edward 161 Ottawa Street Lake George, NY 12845 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.420	Nonpriority creditor's name and mailing address Waitsfield and Champlain Valley Telecom 3898 Main St Waitsfield, VT 05673 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$191.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.421	Nonpriority creditor's name and mailing address Wallkill Valley Federal Savings & Loan 23 Wallkill Avenue Wallkill, NY 12589 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.422	Nonpriority creditor's name and mailing address Warner Norcross & Judd LLP 900 Fifth Third Center, 111 Lyon Street Grand Rapids, MI 49503-2487 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.423	Nonpriority creditor's name and mailing address Warren County Sheriff 413 2nd Street #1 Belvidere, NJ 07823 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.424	Nonpriority creditor's name and mailing address Washington County Sheriff 10 Elm Street Montpelier, VT 05602 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.425	Nonpriority creditor's name and mailing address Washington County Treasurer 383 Broadway Fort Edward, NY 12828 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP Name	Case number (if known)
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3.426	Nonpriority creditor's name and mailing address WB Mason Co, Inc. 59 Centre St Brockton, MA 02301 Date(s) debt was incurred ____ Last 4 digits of account number <u>3821</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$191.11 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.427	Nonpriority creditor's name and mailing address Web Title Agency Corporation 755 Jefferson Road - Suite 300 Rochester, NY 14623 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,149.96 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.428	Nonpriority creditor's name and mailing address Webster Bank, NA. 200 Executive Blvd SO-245 Southington, CT 06489 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.429	Nonpriority creditor's name and mailing address Webster First Federal Credit Union 271 Greenwood Street Worcester, MA 01607 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.430	Nonpriority creditor's name and mailing address Wells Fargo Auto Bankruptcy Department Priority 13 250 E John Carpenter Fwy Irving, TX 75062 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.431	Nonpriority creditor's name and mailing address Wells Fargo Bank NA 7000 Vista Drive West Des Moines, IA 50266 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.432	Nonpriority creditor's name and mailing address Wells Fargo Dealear Services Priority 13 MAC# N9305-162 Minneapolis, MN 55402 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name

3.433	Nonpriority creditor's name and mailing address Weltman, Weinberg & Reis Co., L.P.A. 175 S Third St., Suite 900 Columbus, OH 43215 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.434	Nonpriority creditor's name and mailing address Whalley Computer Associates, Inc. 1 Whalley Way Southwick, MA 01077 Date(s) debt was incurred ____ Last 4 digits of account number <u>SKLHL</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,344.59
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3.435	Nonpriority creditor's name and mailing address William Ambrose, Esq 181 South Main Street Pearl River, NY 10965 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,800.00
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3.436	Nonpriority creditor's name and mailing address William Schiller, Esq. 703 Sachem Cir Slingerlands, NY 12159 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.437	Nonpriority creditor's name and mailing address Windham County Sheriff 185 Old Ferry Road, Brattleboro, VT 05301 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.438	Nonpriority creditor's name and mailing address Yanci Herboldt, Esq. 460 South Main St, #78 North Syracuse, NY 13212 Date(s) debt was incurred ____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 Covius Settlement Services, LLC 1044 Main Street, Suite 700 Kansas City, MO 64105	Line <u>3.94</u> <input type="checkbox"/> Not listed. Explain ____	—

Debtor	Schiller, Knapp, Lefkowitz, & Hertz, LLP	Case number (if known)	
	Name		
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.2	Greater Commonwealth Investors Assoc. LP c/o H.L. Libby Corp. P.O. Box 62336-16 Baltimore, MD 21264	Line 3.162 <input type="checkbox"/> Not listed. Explain _____	—
4.3	Jonathan Warner, Esq. Warner & Warner, PLLC 6 Automation Lane, Suite 109 Albany, NY 12205	Line 3.386 <input type="checkbox"/> Not listed. Explain _____	—
4.4	Jonathan Warner, Esq. Warner & Warner, PLLC 6 Automation Lane, Suite 109 Albany, NY 12205	Line 3.302 <input type="checkbox"/> Not listed. Explain _____	—
4.5	KekyBank NA 4224 Ridge Lea Road Buffalo, NY 14226	Line 3.202 <input type="checkbox"/> Not listed. Explain _____	—
4.6	Leigh Hoffman, Esq. Lippes Mathias LLP 54 State Street, Suite 1001 Albany, NY 12207	Line 3.436 <input type="checkbox"/> Not listed. Explain _____	—
4.7	Paula Barbaruolo, Esq. 12 Cornell Road Latham, NY 12110	Line 3.436 <input type="checkbox"/> Not listed. Explain _____	—
4.8	Relin, Goldstein, & Crane LLP 28 East Main Street, Suite 1800 Rochester, NY 14614	Line 3.148 <input type="checkbox"/> Not listed. Explain _____	—
4.9	Ryant T. Donovan, Esq. Conway, Donovan, & Manley, PLLC 50 State Street, 2nd Fl. Albany, NY 12207	Line 3.436 <input type="checkbox"/> Not listed. Explain _____	—
4.10	ServiceLink, LLC P.O. Box 5111327 Los Angeles, CA 90051-8014	Line 3.357 <input type="checkbox"/> Not listed. Explain _____	—
4.11	The Hartford Financial Services Group P.O. Box 783690 Philadelphia, PA 19178	Line 3.388 <input type="checkbox"/> Not listed. Explain _____	—
4.12	Wells Fargo Auto Finance 435 Ford Road Minneapolis, MN 55426	Line 3.430 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ <u>72,991.60</u>
5b. Total claims from Part 2	5b. + \$ <u>1,929,538.94</u>

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
Name

Case number (if known) _____

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

5c.

\$ <u>2,002,530.54</u>

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Membership Dues**

State the term remaining **2 months**

List the contract number of any government contract _____

**ALFN c/o Schmersahl Treloar & Co, PC
Attn: Mark O'Donnell
10805 Sunset Office Drive - Suite 400
Saint Louis, MO 63127**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Latham, NY - Commercial Lease**

State the term remaining _____

List the contract number of any government contract _____

**B/A Properties, LLC
19 British American Blvd.
Latham, NY 12110**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Commercial Landlord - Pittsburgh**

State the term remaining _____

List the contract number of any government contract _____

**Greater Commonwealth Investors Assoc. LP
c/o H.L. Libby Corp.
803 Commonwealth Drive
Warrendale, PA 15086**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Server Lease**

State the term remaining _____

List the contract number of any government contract _____

**Hewlett-Packard Financial Services Co
200 Connell Drive - Suite 5000
Berkeley Heights, NJ 07922**

Debtor 1 **Schiller, Knapp, Lefkowitz, & Hertz, LLP**
First Name Middle Name Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Opened Servers (leased)**

State the term remaining **53 months**

List the contract number of any government contract

**Hewlett-Packard Financial Services Co
200 Connell Drive - Suite 5000
Berkeley Heights, NJ 07922**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Opened Copiers (leased)**

State the term remaining **14 months**

List the contract number of any government contract

**National Business Leasing
A Program of DeLage Landen Financial Svc
1111 Old Eagle School Road
Wayne, PA 19087**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Commercial Landlord - Buffalo**

State the term remaining

List the contract number of any government contract

**Power Play Partners, LLC
P.O. Box 484
Clarence Center, NY 14032**

2.8. State what the contract or lease is for and the nature of the debtor's interest **HR Services**

State the term remaining **2 months**

List the contract number of any government contract

**Puzzle HR
4030 West Boy Scout Blvd - suite 325
Tampa, FL 33607**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Commercial Landlord - NJ**

State the term remaining

List the contract number of any government contract

**Renob, LLC c/o The Falcon Group
95 Mount Bethel Road
Warren, NJ 07059**

Debtor 1 **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

- 2.10. State what the contract or lease is for and the nature of the debtor's interest **Membership Dues**

State the term remaining **7 months**

List the contract number of any government contract

USFN**9001 Airport Freeway - Suite 740
North Richland Hills, TX 76180**

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertzelt, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Daniel Young**

**35 Nelson Farm Road
Moretown, VT 05660**

☐ D _____
☐ E/F _____
☐ G _____

2.2 **Gary Lefkowitz**

**25 Linden Ct
Clifton Park, NY 12065**

☐ D _____
☐ E/F _____
☐ G _____

2.3 **Ryan Hertzelt**

**25 Amity Pointe Court
Clifton Park, NY 12065**

☐ D _____
☐ E/F _____
☐ G _____

2.4 **William Schiller**

**703 Sachem Circle
Slingerlands, NY 12159**

☐ D _____
☐ E/F _____
☐ G _____

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertz, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2023 to **Filing Date**

☒ Operating a business
☐ Other _____

\$2,100,000.00

For prior year:
From 1/01/2022 to 12/31/2022

☒ Operating a business
☐ Other _____

\$6,386,000.00

For year before that:
From 1/01/2021 to 12/31/2021

☒ Operating a business
☐ Other _____

\$5,889,865.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203	5/16/23	\$18,746.78	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Bank elected set-off

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Ryan Hertz, Esq. 25 Amity Point Clifton Park, NY 12065 Former Partner	Bi-weekly salary	\$0.00	Salary (See SOFA item 30)
4.2. Gary Lefkowitz, Esq. 25 Linden Ct, Clifton Park, NY 12065 Partner	Bi-weekly Salary	\$0.00	Salary (See SOFA item 30)
4.3. Daniel Young, Esq. 38 Nelson Farm Road Moretown, VT 05660 Partner	Bi-weekly Salary	\$0.00	Salary (See SOFA item 30)

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203	Bank account sweep. Last 4 digits of account number: _____	5/16/23	\$18,746.78

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known) _____

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Advantage Legal v. SKLH 900876-23	Accounts Stated	Albany Co. Supreme Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Advantage v. SKLH 900873-23	Accounts Stated	Albany Co. Supreme Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP** Case number (if known) _____

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Boyle Legal LLC 64 2nd Street Troy, NY 12180		5/11/23	\$20,000.00
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 950 New Loudon Road Latham, NY 12110	12/1998-11/2020

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known) _____

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Personal Identifying Information (names, addresses, numbers, EINs, SSNs, etc.)

Does the debtor have a privacy policy about that information?

☐ No☒ Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Capital District Records Management Inc PO Box 4044 Clifton Park, NY 12065	G. Lefkowitz D. Young	Files	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Debtor **Schiller, Knapp, Lefkowitz, & Hertzell, LLP**

Case number (if known) _____

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.****22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements**26a.** List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. BST & Co., CPA's, LLP 10 British American Blvd Latham, NY 12110	
26a.2. Tronconi Segarra & Associates LLP 8321 Main Street, Buffalo, NY 14221	

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **M&T Bank**
One Fountain Plaza - 9th Floor
Buffalo, NY 14203

26d.2. **PennyMac Loan Sevices, LLC**
6101 Condor Drive
Moorpark, CA 93021

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Gary Lefkowitz	25 Linden Ct Clifton Park, NY 12065		50%

Name	Address	Position and nature of any interest	% of interest, if any
Daniel Young	38 Nelson Farm Road Moretown, VT 05660		50%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
William Schiller, Esq.	703 Sachem Cir Slingerlands, NY 12159		

Debtor **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Case number (if known)

Name	Address	Position and nature of any interest	Period during which position or interest was held
Ryan Hertz, Esq.	25 Amity Point Clifton Park, NY 12065		

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Gary Lefkowitz, Esq. 25 Linden Ct, Clifton Park, NY 12065	\$78,183.49	Biweekly Salary (\$3,707.54)	Salary
	Relationship to debtor Partner			
30.2	Daniel Young, Esq. 38 Nelson Farm Road Moretown, VT 05660	\$90,020.00	Biweekly Salary (\$4,091.00)	Salary
	Relationship to debtor Partner			
30.3	Ryan Hertz, Esq. 25 Amity Point Clifton Park, NY 12065	\$92,581.56	Biweekly Salary (\$4018.09)	Salary
	Relationship to debtor Former Partner			

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. **Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☐ No
☒ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
Great West L&A	EIN:

Debtor Schiller, Knapp, Lefkowitz, & Hertz, LLP

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 30, 2023/s/ Gary Lefkowitz

Signature of individual signing on behalf of the debtor

Gary Lefkowitz

Printed name

Position or relationship to debtor Partner

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Northern District of New York

In re **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	20,000.00
Prior to the filing of this statement I have received	\$	20,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Firm to charge Debtor on an hourly fee basis pursuant to pre-petition retainer agreement. Firm representation includes:

Negotiations with secured creditors to reduce to market value; preparation and filing of motions and applications as needed. Representation of the debtor in any dischargeability actions, lien avoidances, relief from stay actions or any other adversary proceeding.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 30, 2023

Date

/s/ Michael Boyle

Michael Boyle

Signature of Attorney

Boyle Legal LLC

64 2nd Street

Troy, NY 12180

518-687-1648 Fax: 518-

mike@boylebankruptcy.com

Name of law firm

**United States Bankruptcy Court
Northern District of New York**

In re **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Debtor(s)

Case No.
Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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**Daniel Young
38 Nelson Farm Road
Moretown, VT 05660**

**Gary Lefkowitz
25 Linden Ct
Clifton Park, NY 12065**

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Partner** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **May 30, 2023**

Signature **/s/ Gary Lefkowitz
Gary Lefkowitz**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF NEW YORK**

In re Schiller, Knapp, Lefkowitz, & Hertzelt, LLP ,
FDBA Schiller & Knapp, LLP

Debtor

Case No.

Chapter **11**

Social Security No(s). and all Employer's Tax Identification No(s). *[if any]*
14-1809981

CERTIFICATION OF MAILING MATRIX

I,(we), Michael Boyle , the attorney for the debtor/petitioner (or, if appropriate, the debtor(s) or petitioner(s)) hereby certify under the penalties of perjury that the above/attached mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities, as they appear on the schedules of liabilities/list of creditors/list of equity security holders, or any amendment thereto filed herewith.

Dated: May 30, 2023

/s/ Michael Boyle

Michael Boyle

Attorney for Debtor/Petitioner
(Debtor(s)/Petitioner(s))

1 Oak Advisory
Acct No n/a
2901 West Coast Hwy
Newport Beach, CA 92663

21st Mortgage Corporation
Acct No n/a
1 Market Street, Suite 100
Knoxville, TN 37902

360 Legal, Inc.
Acct No n/a
201 Fletcher Avenue - Suite 100
Sarasota, FL 34237

3N Document Destruction, Inc.
Acct No 278
P.O. Box 4044
Clifton Park, NY 12065

4908 Associates, LLC
Acct No n/a
120 North Main Street
New City, NY 10956

A. Christine Sano
5 Hidley Ave.
Wynantskill, NY 12198

A.W. Hamel Stair Mfg., Inc.
Acct No n/a
3111 Amsterdam Road
Schenectady, NY 12302

a360 Technology Solutions LLC
Acct No SCHILLER&K
P.O. Box 679278
Dallas, TX 75267

AbacusNext HQ
Acct No xxxx9507
P.O. Box 31001-4038
Pasadena, CA 91110-4038

ABC Car Leasing, Inc.
Acct No n/a
950 New Loudon Road
Latham, NY 12110

ABNB Federal Credit Union
Acct No n/a
830 Greenbrier Circle
Chesapeake, VA 23320

Accu-Serve, Ltd
Acct No n/a
88 Froehlich Farm Blvd - Suite 403
Woodbury, NY 11797

Addison County Sheriff
Acct No n/a
35 Court Street
Middlebury, VT 05753

ADP LLC
Acct No xxx2121
P.O. Box 842875
Boston, MA 02284-2875

Advantage Foreclosure Services, Inc.
Acct No n/a
201 Old Country Road - Suite 200
Melville, NY 11747

Advantage Legal Services, Inc
Acct No n/a
201 Old Country Road
Melville, NY 11747

Affinity Consulting Group
Acct No n/a
8200 Bryan Dairy Road - Suite 160
Seminole, FL 33777

AGCO Finance LLC
Acct No n/a
PO BOX 2000
Des Moines, IA 50320

AIS InfoSource LP
Acct No n/a
LP 5847 San Felipe Suite 1200
Houston, TX 77057

AIS Portfolio Services, LP
Acct No n/a
LP 5847 San Felipe, Suite 1200
Houston, TX 77057

Albany Management, Inc.
Acct No n/a
4 Computer Drive West
Albany, NY 12205

Aldridge Pite, LLP
Acct No n/a
3575 Piedmont Center, Suite 500
Atlanta, GA 30305

ALFN c/o Schmersahl Treloar & Co, PC
Acct No 4114
Attn: Mark O'Donnell
10805 Sunset Office Drive - Suite 400
Saint Louis, MO 63127

Ally Bank serviced by Ally Servicing LLC
Acct No n/a
PO Box 130424
Saint Paul, MN 55113

Alstate Process Service, Inc.
Acct No n/a
60 Burt Drive
Deer Park, NY 11729

AltaTech Asset Management
Acct No n/a
139 Fulton Street, Suite 614
New York, NY 10038

Amanie Akarah-Bailey
42 Troy View Lane
Buffalo, NY 14221

American Airlines Credit Union
Acct No n/a
PO Box 619001, MD2100
DFW Airport
Dallas, TX 75261

American Bank
Acct No n/a
4029 W. Tighman Street
Allentown, PA 18104

American Battlefield Trust
Acct No n/a
1156 15th Street, N.W. Suite 900
Washington, DC 20005

American Credit Acceptance LLC
Acct No n/a
961 E Main St,
Spartanburg, SC 29302

American Honda Finance Corporation
Acct No n/a
3625 West Royal Lane, Suite 200
Irving, TX 75063

American Loan Servicing
Acct No n/a
1192 E Draper Pkwy
Draper, UT 84020

American Mortgage Investment Properties;
Acct No n/a
PO BOX 2741
Seal Beach, CA 90740

AmericanChecked Inc.
Acct No 8722
Dept 0208
P.O. Box 120208
Dallas, TX 75312-0208

AmeriCredit Financial Services
Acct No n/a
PO Box 18353
Arlington, TX 76096

AMOS Financial LLC
Acct No n/a
3330 Skokie Valley Road - Suite 301
Highland Park, IL 60035

Amy DeAngelus
598 Dell Road
Landing, NJ 07850

Animal Clinic of Hampton Bays
Acct No n/a
238 W. Montauk Hwy
Hampton Bays, NY 11946

Anthony Signorelli
Acct No n/a
PO BOX 320
Schroon Lake, NY 12870

Arvest Central Mortgage Company
Acct No n/a
801 John Barrow Road, Suite 1
Little Rock, AR 72205

Ascendus
Acct No n/a
80 Maiden Lane
New York, NY 10038

Ashley Novak
1325 Blue Factory Hill Road
Cropseyville, NY 12052

Asset Research Group
Acct No UNKN
6011 Knotty Wood Dr
Houston, TX 77092

Auction.com, LLC
Acct No UNKN
1 Mauchly
Irvine, CA 92618

Avidia Bank
Acct No n/a
42 Main Street
Hudson, MA 01749

B/A Properties, LLC
Acct No UNKN
19 British American Blvd.
Latham, NY 12110

Baldwin Sutphen & Frateschi, PLLC
Acct No n/a
126 North Salina Street - Suite 400
Syracuse, NY 13202-1050

Bank of America, NA
Acct No n/a
PO BOX 2759
Jacksonville, FL 32203

Bank of Bennington
Acct No n/a
155 North Street
Bennington, VT 05201

Barbara Worek
6914 Keystone Street
Philadelphia, PA 19135

Barrett, Daffin, Frappier, Levine & Bloc
Acct No n/a
780 Johnson Ferry Road, Suite 240
Atlanta, GA 30342

Bayview Financial
Acct No n/a
4425 Ponce De Leon Blvd, 5th Floor
Miami, FL 33146

Bell Point Shores Homeowners Association
Acct No n/a
PO BOX 712
Bolton Landing, NY 12814

Beltway Capital Management, LLC
Acct No n/a
Executive Plaza II
Hunt Valley, MD 21031

Bennington County Habitat for Humanity
Acct No n/a
P.O. Box 1159
Manchester, VT 05254

Black Knight Servicing Tech. - BK/FC
Acct No at-sckn
P.O. Box 849277
Los Angeles, CA 90084-9277

Black Knight Servicing Technologies, LLC
Acct No D82
P.O. Box 809007
Chicago, IL 60680-9007

Black Knight Svcing Technologies, LLC In
Acct No SCHILLER
ATTN: Accounting Department
P.O. Box 842651
Los Angeles, CA 90084-2651

Blue Bridge Financial, LLC
Acct No n/a
535 Washington Street
Buffalo, NY 14203

Brandon Johnson
1245 Ridge Avenue - Unit 108
Philadelphia, PA 19123

Breean VanSolkema
5358 Main Street
Waitsfield, VT 05673

Brian Rayment
Acct No n/a
7666 E. 61st Street, Ste. 550
Tulsa, OK 74133

Brittney Wilkinson
11277 Southwest Lyra Drive
Port Saint Lucie, FL 34987

Brown & Connery
Acct No n/a
360 Haddon Ave.
Collingswood, NJ 08108

BSI Financial Services
Acct No n/a
7500 Old Georgetown Road, Suite 1350
Bethesda, MD 20814

BST & Co., CPA's, LLP
Acct No 46027
10 British American Blvd
Latham, NY 12110

Buckley King
Acct No n/a
1400 Fifth Third Center
Cleveland, OH 44114

Buckley Madole, P.C.
Acct No n/a
14841 Dallas Parkway, Suite 300
Dallas, TX 75254

C&C Lending
Acct No n/a
1844 Darrow Road
Duanesburg, NY 12056

Calendar Call LLC
Acct No n/a
108 Roxbury Drive
Commack, NY 11725

Caliber Home Loans
Acct No n/a
3701 Regent Blvd
Irving, TX 75063

Cap Com FCU
Acct No n/a
4 Winners Circle
Albany, NY 12205

Capital Affordable Housing Funding Corp
Acct No n/a
255 Orange Street
Albany, NY 12210

Capital Bank/Chemung Canal Trust Company
Acct No n/a
1 Chemung Canal Plaza
Elmira, NY 14901

Capital District Records Management Inc
Acct No 278
PO Box 4044
Clifton Park, NY 12065

Carnow Acceptance Corporation
Acct No n/a
2017 Central Ave.
Albany, NY 12205

Carolyn Matthei
901 Park Avenue - Apt 5
Albany, NY 12208

Carrington Mortgage Services, LLC
Acct No n/a
1600 South Douglass Road, Suite 200
Anaheim, CA 92806

Carter Federal Credit Union
Acct No n/a
100 West Church Street
Springhill, LA 71075

Casella Waste Mgt, Inc
Acct No xxx1707
Williston, VT 05495-1372

Catherine Bradwell
Acct No n/a
2 Bergen Woods Drive
Cohoes, NY 12047

Catholic & Community Credit Union
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**United States Bankruptcy Court
Northern District of New York**

In re **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Schiller, Knapp, Lefkowitz, & Hertz, LLP** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

May 30, 2023

Date

/s/ Michael Boyle

Michael Boyle

Signature of Attorney or Litigant

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